



Date Received _____ Operator No. _____

Talc Producers Only

For year ending December 31, 20_____
Title 15, Chapter 23, Part 5, MCA

Name _____

Address _____

Telephone _____

Name of Mine _____

County _____

Section _____ Township _____ Range _____

School District _____

Number of tons of talc _____

Value per ton _____

Taxable Value \$ _____

Schedule of Royalty Interests

| Name | Address | Amount |
|-------------|----------------|---------------|
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief the information contained herein is true, correct, complete and in compliance with applicable Montana statutes and regulations.

Signature of Principal Officer or Agent

Date

Date due: On or before March 1st. Penalties and interest apply on all delinquent reports pursuant to 5-1-216, MCA.

Mail to: Montana Department of Revenue, P.O. Box 5805, Helena, MT 59604-5805